



Michigan Department of Environmental Quality
Office of Waste Management and
Radiological Protection

INSTRUCTIONS FOR COMPLETING
LIQUID INDUSTRIAL BY-PRODUCT UNIFORM PROGRAM FEE WORKSHEET
(ATTACHMENT A to EQP 5122)

**Review these instructions before completing the following worksheet,
Attachment A of the application form EQP 5122.
Please review the DEQ website for more information and helpful hints on
completing your application.**

All transportation of Liquid Industrial By-Product (LIBP) in the State of Michigan (Michigan) must be one of the following:

NOTE: *Transportation of hazardous waste in Michigan requires participation under the Alliance for Uniform HazMat Transportation (Alliance). Failure to maintain a proper Alliance credential invalidates the LIBP credential. If the credential is invalidated, full participation in the registration and permit process of Michigan LIBP Uniform Program is required to transport LIBP in Michigan.*

1. Registered and permitted under the Alliance (for hazardous materials and/or for hazardous waste) **and** registered under the Michigan LIBP Uniform Program.

OR

2. Registered and permitted under the Michigan LIBP Uniform Program.

NOTE: *Transportation of only Michigan LIBP requires completion of the Michigan "Motor Carrier Registration and Permit Application for the Uniform Program for Liquid Industrial By-Product Transportation" form EQP 5122 and subsequent registration and permitting under that program.*

NOTE: *If registered and permitted under the Uniform Hazardous Materials Program or the Michigan Uniform LIBP Program, appropriate apportioned vehicle fees must be paid for LIBP transportation activity in Michigan utilizing the Michigan Department of Environmental Quality, Liquid Industrial By-Product Uniform Program Fee Worksheet, Attachment A (Attachment A) to EQP 5122.*

NOTE: *PARTICIPATING ALLIANCE STATES IN THE UNIFORM HAZARDOUS MATERIALS PROGRAM DO NOT COLLECT AND DISTRIBUTE THESE LIBP FEES. LIBP FEES MUST BE PAID DIRECTLY TO THE STATE OF MICHIGAN and LIBP FEES MUST BE PAID ANNUALLY.*

In **Section 1, Item 1.2.A.**, provide the average number of power units owned, leased or operated for the time period indicated in Section 1 of this attachment. **(Include all fleet vehicles regardless of the state.)** For purposes of the Michigan LIBP Uniform Program, the definition of a power unit is the same as "truck" and "truck tractor" as defined in 49 CFR 390.5. The following categories of vehicles may be excluded from the average reported.

- Vehicles that are used exclusively for the transportation of personnel, as opposed to freight, including fleet maintenance vehicles.
- Power units that do not operate on public highways.

In **Section 1, Item 1.2.B.**, provide the calculation of **ALL** transportation activity for the previous year involving LIBP regardless of the state. **All** calculations **MUST** be reported in **percentages**.

NOTE: *If the applicant is only transporting LIBP, the calculation is 100%.*

If the percentage reported is less than 100%, the applicant must provide documentation.

Percentages may be calculated in a number of ways, including but not limited to:

- ***Divide the number of shipments of LIBP by the total number of shipments and multiply the result by 100 to obtain the percentage.***
- ***Divide the total number of gallons of LIBP shipped by the total number of gallons of all materials shipped (hazardous waste, commodities, etc.) and multiply the result by 100 for the percentage.***

In **Section 1, Item 1.2.C.**, provide the calculation of **ALL** transportation mileage in Michigan including LIBP, hazardous material, commodities, etc. For interstate carriers, the International Registration Plan (IRP) calculations should be used.

All calculations **MUST** be reported in **percentages**.

If all mileage is in Michigan (intrastate carrier), the percentage is 100%

If the percentage reported is less than 100%, the applicant must provide documentation.

NOTE: ***The applicant may opt to use 100% for both Items 1.2.B and 1.2.C, in which case the vehicle registration fee total is 1.2.A (total number of fleet vehicles) x \$50.***

Participation in the **Alliance program (hazardous waste or hazardous materials transportation)** requires **Section 1, 2 and 3** of this Attachment A to be completed. The applicant is not required to complete the Michigan “Motor Carrier Registration Permit for the Uniform Program Application for LIBP Transportation” form EQP 5122. **Submit a copy of the current Alliance Program Credential, and a copy of Page 1 of the most recent Alliance Program application.**

Participation in the **Michigan LIBP Uniform Program** requires only **Section 1 and 2** of this **Attachment A** to be completed and submitted with the completed Michigan “Motor Carrier Registration Permit for the Uniform Program Application for LIBP Transportation” form EQP 5122.

General Application Certifications

- Review the certification on Attachment A and complete the needed information. Attachment A shall be signed by an official of the applicant company authorized to certify applications for registrations and permits.

Questions should be directed to:

*Ms. Sandra Ray
Transportation Section
Michigan Department of Environmental Quality
Resource Management Division
27700 Donald Ct.
Warren, MI 48092-2793
Email address: RayS1@michigan.gov
Phone: 586-753-3850
Fax: 586-753-3831*



**Michigan Department of Environmental Quality
Resource Management Division
LIQUID INDUSTRIAL BY-PRODUCT UNIFORM PROGRAM FEE WORKSHEET
ATTACHMENT A to EQP 5122**

REVIEW THE INSTRUCTIONS BEFORE COMPLETING THIS WORKSHEET

Section 1	
Time coverage for this fee schedule which covers the <u>previous</u> 12 month period: Calendar Year 20____, Or Fiscal Year – From _____ to _____	
1.1	<u>Part I - LIBP General Processing Fee</u> Fee for the time period noted above: \$50 <u>NOTE:</u> <i>If applicant is registered under the Uniform Hazardous Materials Program, no processing fee is required for LIBP.</i>
1.2	<u>LIBP Annual Vehicle Registration Fee:</u> <u>NOTE:</u> <i>An applicant registered under either the Uniform Hazardous Materials Program or the Uniform Program for Liquid Industrial By-Product, transporting LIBP in Michigan, are required to pay a registration fee as computed below.</i> A. Number of Power Units (Entire Fleet) for the time coverage noted above: _____ B. Calculation of all transportation activity involving LIBP by PERCENT _____ (See Note Below) _____ C. Calculation of all transportation mileage in Michigan by PERCENT _____ (See Note Below) _____ D. Apportioned Power Units: Multiply A x B x C = _____ (Round up to next whole number e.g. .239 = 1, 3.045 = 4) E. Annual Vehicle Registration Fee: D x \$50 = \$ <u>NOTE:</u> <i>If calculation used in B and C is less than 100% (1), complete documentation of all transportation activity and mileage must be supported and submitted with this Attachment A. As an alternative, the applicant may calculate a vehicle registration fee equal to A x \$50.00. Place this amount in "Section 1 Summary 1.2.E". (1).</i>
1.3	<u>Part II LIBP Permit Review Fee:</u> \$500 <u>NOTE:</u> <i>This fee is payable the first year of application and every three years thereafter. For example, first application made in 1998, paid \$500 and again pay \$500 in 2001, 2004, etc., with reapplication.</i> <u>If applicant is registered under the National Uniform Hazardous Materials Program, no permit fee is required for LIBP.</u>

<u>Section 1 Summary:</u>	
1.1	Part I - LIBP Annual General Processing Fee: \$ 50 (Not required if Uniform Hazardous Materials Program Participant)
1.2.E.	LIBP Annual Vehicle Registration Fee (From 1.2.E): \$ _____
1.3	Part II - LIBP Permit Review Fee (initially and every 3 rd year: \$(0) or 500 (Not required if Uniform Hazardous Materials Program Participant)
<u>Michigan LIBP Uniform Program Applicant</u> TOTAL: 1.1 + 1.2.E. + 1.3 = \$ _____ <div style="text-align: center;">OR</div> <u>Uniform Hazardous Materials Program Participant</u> TOTAL: 1.2.E = \$ _____	

Section 2 Company Information (All applicants)

Company Name: _____
 Mailing Address: _____
 Contact Name: _____
 Contact Phone: _____
 Contact Email: _____

Section 3: Alliance Program Information

Base State: _____
Uniform Hazardous Materials Program Credential No. (Submit Copy): _____
Uniform Hazardous Materials Program Expiration Date: _____
Federal EPA Transporter Identification No./Site ID Number: _____

I, the undersigned, swear and affirm that the statements, documents, credentials (if applicable) and attachments are true and correct. Additionally, the removal, transportation and disposal of Liquid Industrial By-Product will be done in accordance with the requirements of Part 121, Liquid Industrial By-Products, Michigan Compiled Laws (MCL) 324.12101 et seq. and Part 111, Hazardous Waste Management (Used Oil), MCL 324.11101 et seq. of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, and any administrative rules promulgated. I understand and affirm the authority of the Department of Environmental Quality, the Department of State Police, Department of Natural Resources, or the local law enforcement agency to perform reasonable inspections on transportation vehicles, equipment, and facilities.

Name (Owner/Officer)

Title

Telephone

Signature

Date

False statements may violate state law, may incur penalties, and may invalidate the registration and permit form.

TO PAY BY CHECK, MAKE CHECK PAYABLE TO THE "STATE OF MICHIGAN"

Mail this Attachment A, the application EQP 5122 (if applicable), copy of the National Program Credential (if applicable), copy of Page 1 of the most recent National Program Application (if applicable) and fees to the following address:

Cashiering
 Michigan Department of Environmental Quality
 P.O. Box 30657
 Lansing, Michigan 48909

Cashiers Validation Area

For overnight/express mail delivery:

Michigan Department of Environmental Quality
 Cashier's Office 5th Floor, South
 525 W. Allegan St.
 Lansing, Michigan 48933